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AUG 10 2006

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Pamela L. Rader

(Depositor's name)

Pamela L. Rader

(Signature)

August 10, 2006

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/892,216	06/23/2001	Joseph I. Chamdani	233-583-USP	1441

TITLE OF INVENTION: PACKET SWITCHING APPARATUS INCLUDING CASCADE PORTS AND METHOD FOR SWITCHING PACKETS

APPL. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	<del>YES</del> NO	\$700- \$1,400	\$0	\$700- \$1,400	08/14/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
MOORE, IAN N	2516	370-386000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Hensley Kim &amp; Edgington, LLC

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Sanera Systems, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Broomfield, Colorado USA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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☒ Issue Fee☐ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies \_\_\_\_\_

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☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by change the required fee(s), or credit any overpayment, to Deposit Account Number 50-3199 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☒ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(d)(2).

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Authorized Signature

Typed or printed name Heather C. Larson

Date

Registration No. 50,411

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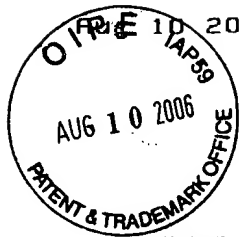
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PTO/6B/97 (08-04)

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*Pamela L. Rader*

Signature

Pamela L. Rader

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Registration Number, if applicable

Telephone Number

U.S. Patent Application Serial No. 08/892,218

Title: Packet Switching Apparatus Including Cascade Ports and Method for Switching Packets

Filing Date: June 25, 2001

Attorney Docket No. 233-583-USP/MCD150

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MAIL STOP ISSUE FEE

PTO Fax Number: 571-273-2885

FROM: Heather C. Larson/Reg. No. 50,411

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Fax Transmittal Cover Sheet (1 page); and

Issue Fee Transmittal in duplicate (2 pages: original + duplicate for fee processing).

Total Pages in Transmission: 3

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